	Exhib	oit JJ - Alternativ	e Financing Popu	lations <sup>(1)</sup>					
			17 Calculation						
		Cap	oitations						
DESCRIPTION OF ESTIMATE				CALCULATION OF MATCH					
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	
Hospital Provider Fee Cash Fund:									
MAGI Parents and Caretakers 60% - 68% FPL	8,541	\$347.19	\$2,965,379	\$0	\$1,476,759	\$0	\$1,488,620	50.20%	
MAGI Parents and Caretakers 69% - 133% FPL	85,317	\$194.58	\$16,600,774	\$0	\$415,019	\$0	\$16,185,755	97.50%	
MAGI Adults	361,941	\$642.61	\$232,585,249	\$0	\$5,814,631	\$0	\$226,770,618	97.50%	
Non Newly Eligible	2,409	\$642.61	\$1,548,036	\$0	\$221,679	\$0	\$1,326,357	85.68%	
Buy-In for Disabled Individuals	6,095	\$1,677.07	\$10,221,717	\$0	\$5,090,415	\$0	\$5,131,302	50.20%	
Continuous Eligibility Financing	38,353	\$237.93	\$9,125,397	\$0	\$4,544,448	\$0	\$4,580,949	50.20%	
Total from Hospital Provider Fee Fund	-	-	\$273,046,552	\$0	\$17,562,951	\$0	\$255,483,601		
SB 11-008: Aligning Medicaid Eligibility for Children									
Former CHP+ Children	63,858	\$237.93	\$15,193,847	\$1,803,510	\$0	\$0	\$13,390,337	88.13%	
SB 11-250: Eligibility for Pregnant Women in Medicaid									
Former CHP+ Prenatal	1,791	\$347.19	\$621,823	\$73,810	\$0	\$0	\$548,013	88.13%	
		Fee-fe	or-Service						
DESCRIPTION (	OF ESTIMATE			CALCULATION OF MATCH					
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	
Hospital Provider Fee Cash Fund:									
Magi Parents and Caretakers 60% - 68% FPL	8,541	\$8.43	\$72,001	\$0	\$35,856	\$0	\$36,145	50.20%	
MAGI Parents and Caretakers 69% - 133% FPL	85,317	\$5.69	\$485,454	\$0	\$12,136	\$0	\$473,318	97.50%	
MAGI Adults	361,941	\$10.60	\$3,836,575	\$0	\$95,914	\$0	\$3,740,661	97.50%	
Non Newly Eligible	2,409	\$10.60	\$25,535	\$0	\$3,657	\$0	\$21,878	85.68%	
Buy-In for Disabled Individuals	6,095	\$4.85	\$29,561	\$0	\$14,721	\$0	\$14,840	50.20%	
Continuous Eligibility Financing	38,353	\$2.66	\$101,869	\$0	\$50,731	\$0	\$51,138	50.20%	
Total from Hospital Provider Fee Fund	-	-	\$4,550,995	\$0	\$213,015	\$0	\$4,337,980		
SB 11-008: Aligning Medicaid Eligibility for Children									
Former CHP+ Children	63,858	\$3.84	\$245,215	\$29,107	\$0	\$0	\$216,108	88.13%	
SB 11-250: Eligibility for Pregnant Women in Medicaid									
Former CHP+ Prenatal	1,791	\$2.69	\$4,818	\$572	\$0	\$0	\$4,246	88.13%	

<sup>1</sup> The Department's allocation methodology is described in the Alternative Financing Populations section of this Budget Request.

	Exhil	oit JJ - Alternativ	ve Financing Popu	ılations (1)					
			18 Calculation						
DESCRIPTION	OF EGMINAL ME	Cap	pitations		CALC	TT THON OF MAR	- CTT		
DESCRIPTION OF ESTIMATE				CALCULATION OF MATCH					
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	
Hospital Provider Fee Cash Fund:									
MAGI Parents and Caretakers 60% - 68% FPL	9,996	\$355.06	\$3,549,155	\$0	\$1,774,577	\$0	\$1,774,578	50.00%	
MAGI Parents and Caretakers 69% - 133% FPL	80,982	\$196.38	\$15,903,143	\$0	\$874,673	\$0	\$15,028,470	94.50%	
MAGI Adults	386,937	\$657.61	\$254,452,804	\$0	\$13,994,904	\$0	\$240,457,900	94.50%	
Non Newly Eligible	2,529	\$657.61	\$1,663,090	\$0	\$276,406	\$0	\$1,386,684	83.38%	
Buy-In for Disabled Individuals	7,414	\$1,715.07	\$12,715,536	\$0	\$6,357,768	\$0	\$6,357,768	50.00%	
Continuous Eligibility for Children	39,706	\$243.32	\$9,661,068	\$0	\$4,830,534	\$0	\$4,830,534	50.00%	
Total from Hospital Provider Fee Fund	-	-	\$297,944,796	\$0	\$28,108,862	\$0	\$269,835,934		
SB 11-008: Aligning Medicaid Eligibility for Children									
Former CHP+ Children	69,199	\$243.32	\$16,837,160	\$2,020,459	\$0	\$0	\$14,816,701	88.00%	
SB 11-250: Eligibility for Pregnant Women in Medicaid									
Former CHP+ Prenatal	1,803	\$355.06	\$640,169	\$76,820	\$0	\$0	\$563,349	88.00%	
		Fee-fo	or-Service						
DESCRIPTION	OF ESTIMATE			CALCULATION OF MATCH					
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate	
Hospital Provider Fee Cash Fund:									
MAGI Parents and Caretakers 60% - 68% FPL	9,996	\$8.43	\$84,266	\$0	\$42,133	\$0	\$42,133	50.00%	
MAGI Parents and Caretakers 69% - 133% FPL	80,982	\$5.69	\$460,788	\$0	\$25,343	\$0	\$435,445	94.50%	
MAGI Adults	386,937	\$10.60	\$4,101,532	\$0	\$225,584	\$0	\$3,875,948	94.50%	
Non Newly Eligible	2,529	\$10.60	\$26,807	\$0	\$4,455	\$0	\$22,352	83.38%	
Buy-In for Disabled Individuals	7,414	\$4.85	\$35,958	\$0	\$17,979	\$0	\$17,979	50.00%	
Continuous Eligibility Financing	39,706	\$2.66	\$105,463	\$0	\$52,731	\$0	\$52,732	50.00%	
Total from Hospital Provider Fee Fund	-	-	\$4,814,814	\$0	\$368,225	\$0	\$4,446,589		
SB 11-008: Aligning Medicaid Eligibility for Children									
Former CHP+ Children	69,199	\$3.84	\$265,724	\$31,887	\$0	\$0	\$233,837	88.00%	
SB 11-250: Eligibility for Pregnant Women in Medicaid									
Former CHP+ Prenatal	1,803	\$2.69	\$4,850	\$582	\$0	\$0	\$4,268	88.00%	

	Exhi	bit JJ - Alternativ	e Financing Popu	lations <sup>(1)</sup>						
			19 Calculation							
		Cap	oitations							
DESCRIPTION	DESCRIPTION OF ESTIMATE				CALCULATION OF MATCH					
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate		
Hospital Provider Fee Cash Fund:										
MAGI Parents and Caretakers 60% - 68% FPL	10,588	\$363.44	\$3,848,078	\$0	\$1,924,039	\$0	\$1,924,039	50.009		
MAGI Parents and Caretakers 69% - 133% FPL	88,611	\$200.83	\$17,795,836	\$0	\$1,156,729	\$0	\$16,639,107	93.509		
MAGI Adults	403,982	\$673.04	\$271,894,430	\$0	\$17,673,138	\$0	\$254,221,292	93.509		
Non Newly Eligible	2,593	\$673.04	\$1,745,182	\$0	\$303,138	\$0	\$1,442,044	82.639		
Buy-In for Disabled Individuals	8,680	\$1,753.84	\$15,223,289	\$0	\$7,611,644	\$0	\$7,611,645	50.009		
Continuous Eligibility Financing	40,480	\$248.96	\$10,077,958	\$0	\$5,038,979	\$0	\$5,038,979	50.009		
Total from Hospital Provider Fee Fund	-	-	\$320,584,773	\$0	\$33,707,667	\$0	\$286,877,106			
SB 11-008: Aligning Medicaid Eligibility for Children										
Former CHP+ Children	72,116	\$248.96	\$17,954,102	\$2,154,492	\$0	\$0	\$15,799,610	88.009		
SB 11-250: Eligibility for Pregnant Women in Medicaid										
Former CHP+ Prenatal	1,803	\$363.44	\$655,278	\$78,633	\$0	\$0	\$576,645	88.009		
		Fee-fo	or-Service							
DESCRIPTION	OF ESTIMATE			CALCULATION OF MATCH						
Eligibility Category	Caseload	Estimated Per Capita Cost	Total Estimate	General Fund	Cash Funds	Reappropriated Funds	Federal Funds	FFP Rate		
Hospital Provider Fee Cash Fund:										
MAGI Parents and Caretakers 60% - 68% FPL	10,588	\$8.43	\$89,257	\$0	\$44,628	\$0	\$44,629	50.009		
MAGI Parents and Caretakers 69% - 133% FPL	88,611	\$5.69	\$504,197	\$0	\$32,773	\$0	\$471,424	93.509		
MAGI Adults	403,982	\$10.60	\$4,282,209	\$0	\$278,343	\$0	\$4,003,866	93.509		
Non Newly Eligible	2,593	\$10.60	\$27,486	\$0	\$4,774	\$0	\$22,712	82.639		
Buy-In for Disabled Individuals	8,680	\$4.85	\$42,098	\$0	\$21,049	\$0	\$21,049	50.009		
Continuous Eligibility Financing	40,480	\$2.66	\$107,519	\$0	\$53,759	\$0	\$53,760	50.009		
Total from Hospital Provider Fee Fund	-	-	\$5,052,766	\$0	\$435,326	\$0	\$4,617,440			
SB 11-008: Aligning Medicaid Eligibility for Children					_					
Former CHP+ Children	72,116	\$3.84	\$276,925	\$33,231	\$0	\$0	\$243,694	88.009		
SB 11-250: Eligibility for Pregnant Women in Medicaid					_					
Former CHP+ Prenatal	1,803	\$2.69	\$4,850	\$582	\$0	\$0	\$4,268	88.009		
<sup>1</sup> The Department's allocation methodology is described in the Alternativ	ve Financing Populations sec	tion of this Budget Re	equest.							